## **PCT**

## **REQUEST**

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

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accord	ing to the rate	ent Cooperation i	icary.	Traine of receiving e	ince and Tel inte			
				Applicant's or agent (if desired) (12 chara	s file reference cters maximum) A-	-988-WO-PCT		
			COMPOSITIO	ONS AND METHO	DS FOR USE IN	I TREATING		
Box No. II	APPLICAN'	Т	This perso	n is also inventor				
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)			Telephone No.					
AMGEN INC.				Facsimile No.	Facsimile No.			
Patent Operations, M/S 28-2-C One Amgen Center Drive Thousand Oaks, CA 91320 US			Teleprinter No.	Teleprinter No.				
			Applicant's reg	Applicant's registration No. with the Office				
State (that is,	State (that is, country) of nationality:  US  State (that is, country)  US			ry) of residence:				
This person is for the purpor		all designated States	all designat the United	ed States except States of America	the United States of America only	the States indicated in the Supplemental Box		
Box No. III	FURTHER	APPLICANT(S)	AND/OR (FURT	HER) INVENTOR(S	5)	_		
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  AKERMAN, Michelle 300 3rd Street #523 San Francisco, CA 94107 US			applica  applica invente market	applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)				
						istration No. with the Office		
State (that is,	State (that is, country) of nationality:  US  State (that is, country) of residence:  US							
This person i	is applicant oses of:	all designated States	all designate the United	ted States except States of America	the United States of America only	the States indicated in the Supplemental Box		
Further applicants and/or (further) inventors are indicated on a continuation sheet.								
Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE								
The person i	dentified below ant(s) before th	is hereby/has been e competent Interna	appointed to act ational Authoritie	on behalf es as:	agent	common representative		
The address must include postal code and name of country.)			70 Telephone No. 805-447-2					
FRIEDRICHSEN, Bernard P. AMGEN INC.			Facsimile No. 805-499-	Facsimile No. 805-499-8011				
Law Department, M/S 28-2-C One Amgen Center Drive			Teleprinter No	•				
Thousand Oaks CA 91320-1799			A	ation No with the Office				
US			Agent's registr	ation No. with the Office				
Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.								

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)  If none of the following sub-boxes is used, this sheet should not be included in the request.					
Name and address: (Family name followed by given name; for a legal entity The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence HOUZE, Jonathan 2383 Ticonderoga Drive San Mateo, CA 94402 US	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office				
State (that is, country) of nationality: US	State (that is, country, US	of residence:			
This person is applicant all designated all designated for the purposes of:		the United States of America only the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence LIN, Daniel C.H.  990 Governors Bay Drive Redwood City, CA 94065 US	e address indicated in this	This person is:  applicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office			
State (that is, country) of nationality: US	State (that is, country	) of residence:			
This person is applicant all designated for the purposes of:	States except ates of America	the United States the States indicated in of America only the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  LIU, Jiwen 721 Celestial Lane Foster City, CA 94404  US  This person is:  applicant only inventor only (If this check is marked, do not fill in beautiful in the country) of the address indicated in this person is:  Applicant only  Applicant's registration No. with					
State (that is, country) of nationality:	State (that is, country	) of residence:			
	I States except ates of America	the United States of America only the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  LUO, Jian 240 Klamath Street Brisbane, CA 94005 US  This person is:  applicant only  proper applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office					
State (that is, country) of nationality:  US  State (that is, country) of residence: US					
This person is applicant for the purposes of:  all designated states except the United States of America  the United States of America only  the States indicated in the Supplemental Box					
Further applicants and/or (further) inventors are indicated on another continuation sheet.					

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)					
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Name and address: (Family name followed by given name; for a legal entity The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence MEDINA, Julio C.  1407 Cedar Street San Carlos, CA 94070 US	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office				
State (that is, country) of nationality:	) of residence:				
		the United States of America only the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence QIU, Wei 974 Diaz Lane Foster City, CA 94404 US	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office				
State (that is, country) of nationality:	e) of residence:				
This person is applicant all designated for the purposes of:	States except ates of America	the United States of America only the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entit The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residen REAGAN, Jeffrey D. 524 Lomita Avenue Millbrae, CA 94030 US	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office				
State (that is, country) of nationality: US	State (that is, country	y) of residence:			
This person is applicant for the purposes of:  all designated states all designated the United St	States except ates of America	the United States of America only the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  SHARMA, Rajiv  5419 Shattuck Avenue  Fremont, CA 94555  US  This person is:  applicant only  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the O					
State (that is, country) of nationality:  IN  State (that is, country) of residence: US					
This person is applicant for the purposes of:  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box					
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Sheet	No		4		

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)					
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Name and address: (Family name followed by given name; for a legal entity The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence SHUTTLEWORTH, Stephen J.  4 Thames Close, Bourne End S18 5QJ, Buckinghamshire GB	e address indicated in this				
State (that is, country) of nationality:  GB	State (that is, country) of residence:  GB				
This person is applicant all designated all designated for the purposes of:	States except the United States of America only the Supplemental Box				
Name and address: (Family name followed by given name; for a legal entity. The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence. SUN, Ying 810 Ohlone Avenue, Apt. 823 Albany, CA 94706 US	e address indicated in this	e			
State (that is, country) of nationality:  CN	State (that is, country) of residence: US				
	States except ates of America only the States indicated in the Supplemental Bo	in ox			
Name and address: (Family name followed by given name; for a legal entithe address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence ZHANG, Jian 808 Rigel Lane Foster City, CA 94404	e address indicated in this \	:e			
State (that is, country) of nationality:	State (that is, country) of residence:				
	the United States the States indicated the Supplemental Bo	in ox			
Name and address: (Family name followed by given name; for a legal entity the address must include postal code and name of country. The country of it box is the applicant's State (that is, country) of residence if no State of residence ITO State of State	he address indicated in this	ce			
State (that is, country) of nationality: CN	State (that is, country) of residence:				
This person is applicant all designated all designate	d States except the United States the States indicated the Supplemental Bo	in lox			
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Name and address: (Family name followed by given name; for a legal entity The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence LIU, Jinqian 991 Addison Avenue Palo Alto, CA 94301 U.S.A.	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office				
State (that is, country) of nationality:	State (that is, country)	of residence:			
This person is applicant all designated for the purposes of:		the United States of America only the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence MA, Zhihua 2712 Flores Street, Apt. 106 San Mateo, CA 94403 US	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office				
State (that is, country) of nationality:	State (that is, country)	) of residence:			
This person is applicant all designated states all designated the United States	States except ates of America	the United States of America only the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entit The address must include postal code and name of country. The country of th Box is the applicant's State (that is, country) of residence if no State of residen	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office				
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